shservation, and by the result of many operations for hernia.—Ed. Med. and Surg. Journ., July, 1840, from Comptes Rendus, 2d March, 1840.

43. Radical cure of Inguinal Hernia by the Horizontal Position.—M. Ravin some time ago made known to the public his new mode of curing hernia radically, by merely confining the person, for a length of time, strictly to the horizontal posture, and applying over the abdominal ring gentle compression, &c. M. Biagini has lately verified this statement, by having had a patient who was afflicted with a large inguinal hernia, which had existed for two years, accidentally confined to his bed with another disease for upwards of three months. At the end of this period, when the man arose, to his delight, he found that the hernia did not return. No tumour was perceptible in the region of the inguinal canal, and he could cough and exert himself in every way without producing a return of the eomplaint. The man was 32 years of age.

This case confirming the views of M. Ravin, appeared to justify M. Biagini

in drawing the following conclusions:

1. That it is possible to obtain a radical cure of some herniæ by the horizon-

tal posture long continued.

2. That this cure takes place in consequence of a diminution in the size of the side of the canal and the contraction of its walls, which again assume the oblique course, which they had lost; which changes take place in virtue only of

the tonic powers of the tissues.

- 3. That in order that the tissues should have sufficient tonicity to produce this important change, the person must be possessed of considerable vital energy; a circumstance which will prevent old men from being treated by this plan, both on account of their general weakness, and the danger of a long-continued horizontal posture to them; and lastly, it would be of no use in very large herniæ, where the canal is reduced to the state of a simple ring, and so altered, that no tonic force of the parts could restore it to its normal condition.—Ibid. from Bulletino delle Scienze Mediche, January, 1840.
- 44. Foreign Body in the Larynx.—A young child, while playing with common beans, allowed one to escape into the larynx. The usual symptoms of suffocation were immediately induced, but were calmed, as by enchantment, by the administration of a tablespoonful of olive oil. Whenever the symptoms of suffocation recommenced, they were found to be relieved by the administration of the oil; the operation of tracheotomy was therefore not performed, and on the fortieth day after the escape of the bean into the larnyx, it was coughed up in fragments.

M. Renauldin mentioned a curious fact with regard to the presence of a foreign body in the air-passages. On opening a body, a fragment of a nail was found in the lung; and yet no symptom existed during life, which could have led to the supposition that a fragment of iron was contained in these organs.—

Ibid. from Séances de l'Acad. Roy. de Méd., January 28, 1840.

45. Successful Treatment of Dropsy of the Synovial Membranes by Tartar Emetic. M. Gimelle has found the administration of tartar emetic in large doses very efficacious in curing dropsy of the synovial membranes; causing complete absorption of the fluid, with abatement of all inflammatory symptoms, if any exist. Twenty-seven cases of dropsy of the joints have been treated successfully by him. He, without any previous treatment, commenced by giving four grains of tartar emetic in the twenty-four hours, and increased the dose by two grains every day, till from eighteen to twenty grains were taken daily. As soon as toleration of the medicine was established, the fluid began to be absorbed, and the cure was in general complete in from eight to sixteen days.

In only five of these cases was vomiting excited by the medicine, in two cases for three days. In eight cases it produced alvine evacuations; but its most general and constant effects were diminution of the strength and quickness of the pulse, weakness of the voice, abundant nocturnal perspirations, and the ap-

pearance of a dark circle around the eyes. In almost every case the appetite remained unimpaired. M. Gimelle regards this plan of treatment as the most successful ever yet proposed for the treatment of dropsy of the synovial membranes.—Ibid. from Bulletin de l'Acad. Royale de Méd. July 4,1840.

- 46. Treatment of Syphilitic Ulcers by Ioduret of Iron.—M. Baumes, chief surgeon of the hospital at Lyons, has of late used this new ferriginous preparation with most satisfactory results in the treatment of old and obstinate syphilitic ulcers, especially when the state of the system of the patient was at the same time feeble and scrotolous. He administered it in the form of pills with Thebaic extract, increasing the dose of the ioduret from two or three to twelve or twenty grains in the course of twenty-four hours. Along with the cicatrisation of the sores, the improvement of the general health was most remarkable; the appetite improved, the muscular strength increased, and the complexion acquired the florid hue of vigorous health. The salt, no doubt, is taken into the circulation, and acts on the blood itself, as well as on the capillary vessels in every part of the body.—Med. Chirurg. Rev. Oct. 1840.
- 47. Compound comminuted fracture of the Elbow—cure without Amputation.—The 3d of last January, M. Lallemann presented to the Society of Practical Medicinc of Moutpellier a man 32 years of age, who had been cured of a very serious wound. This man whilst at work, in February, 1839, in building a house, was struck by a large beam, which fell from a height of about twelve feet, and which caught his right arm against a stone and crushed a great part of the elbow. A portion of the fractured articular extremities of the ulna and the humerus had to be extracted, and the clbow joint was extensively opened. This workman entered the hospital seventeen days after the accident in order to undergo amputation. M. Lallemand, considering the robust constitution of the subject, determined to wait. Healthy granulations soon sprouted from the bottom of the wound, and the cure was complete at the end of three ments. At the time of presentation, the humero-cubital articulation was anchylosed, but the superior radio-cubital articulation was capable of motion; nevertheless, nearly all the motions of pronation and supination were performed by the aid of the scappilo-humeral articulation.—Lancette Française—Journ. de Soc. de Mid. prat. de Montpellier, Mai, 1840.

48. Memoranda on Culaneous Transplantations.—When crysipelas comes on in the face after a rhino-plastic operation, it is usually arrested at the edges or limits of the restored part. This was especially remarkable in the case of a patient operated on by Dieffenbach, at the hospital St. Lonis in Paris.

M. Ricord also has published a similar instance. On the seventh day after the operation, the patient began to experience pain under the chin, and at this part an erysipelatous redness was visible. Next day this had extended over the entire face, the newly-made nose alone remaining intact; it was cold, insensible, and, as it were, indifferent to what was going on all around it. Although the local inflammation was very severe, it was ultimately subdued; yet at no time did the new nose participate in it.

Dieffenbach mentions that one of his patients, on whom he had operated, was attacked with jaundice, during which the entire face—with the exception of the

nose, which remained white became as yellow as a guinea.

M. Phillips insists very particularly on the necessity of keeping the newly-formed organ very cool with refrigerant lotions, and even of drawing blood freely from it as well as from the adjacent parts, and never of applying—as has too often been done—spirituous or other stimulating washes for the purpose of exciting the circulation. The condition of the transplanted tissues seem to be very nearly analogous with that of frost-bitten parts; in the case of which, it is well known, the application of heat and exciting substances must be carefully avoided. As illustrative of the same fact, M. Phillips goes on to state:—

· · · · Dieffenbach remarked that in cholera patients, who recovered,